

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L80048** (6)

1. Corporation Name
ROMA INTERNATIONAL TRADING, INC.

195 MAR -3 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

% RONALD PEYREAU
5218 NW 99TH AVE
SUNRISE FL 33351

Mailing Address

% RONALD PEYREAU
5218 NW 99TH AVE
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/13/1990	3a. Date of Last Report 03/31/1994
4. FEI Number 65-0200593	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State, Apt. #, etc. 22	State, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

PEYREAU, RONALD
5218 NW 99TH AVE
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director)

(NOTE: Registered Agent signature required when applicable)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
101. NAME 102. STREET ADDRESS 103. CITY & STATE 104. ZIP	DP PEYREAU, RONALD 5218 NW 99TH AVE SUNRISE FL	11. TITLE 12. NAME 13. STREET ADDRESS 14. CITY - ST - ZIP	☐ Change ☐ Addition
101. NAME 102. STREET ADDRESS 103. CITY & STATE 104. ZIP	DST PAYREAU, FERIDA 5218 NW 99TH AVE SUNRISE FL	21. TITLE 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP	☐ Change ☐ Addition
101. NAME 102. STREET ADDRESS 103. CITY & STATE 104. ZIP		31. TITLE 32. NAME 33. STREET ADDRESS 34. CITY - ST - ZIP	☐ Change ☐ Addition
101. NAME 102. STREET ADDRESS 103. CITY & STATE 104. ZIP		41. TITLE 42. NAME 43. STREET ADDRESS 44. CITY - ST - ZIP	☐ Change ☐ Addition
101. NAME 102. STREET ADDRESS 103. CITY & STATE 104. ZIP		51. TITLE 52. NAME 53. STREET ADDRESS 54. CITY - ST - ZIP	☐ Change ☐ Addition
101. NAME 102. STREET ADDRESS 103. CITY & STATE 104. ZIP		61. TITLE 62. NAME 63. STREET ADDRESS 64. CITY - ST - ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.12(4)(b), Florida Statutes. I further certify that the information indicated on this filing is true and accurate and that my signature shall have the same legal effect as if made by the officer or director of the corporation or the officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR

2-27-95